

NHS VOLLEYBALL TOURNAMENT
FRIDAY, FEBRUARY 26 – 27TH, 2016
PARENT PERMISSION SLIP

_____ has my permission to participate in the National Honor Society's All Night Volleyball Tournament on Friday, February 26, 2016. I understand that this event is a lock-in and that once my son/daughter enters the school, he/she must remain inside until morning.

Start Time: 11:00 pm (arrive by 10:45 pm)

Pick-up Time: 7:00am

Parent/Guardian Signature

Date

Parent/Guardian Printed Name

Phone # where I can be reached the evening and morning of the event.

Student's Homeroom

****No student may leave before 7:00 am
without written parent permission****

**** Any student who forges a parent/guardian signature will forfeit their TEAMS' right to participate in the Volleyball Marathon.**

This form and \$7 cash MUST be
returned to your team captain on
or before **FEBRUARY 11, 2016.**